## 

Fill in thi	s information to identify your case:	CI	heck one box only as	directed in this form and i	in Form
Debtor 1	Justis Ellen Johnson	12	22A-1Supp:		
Debtor 2 (Spouse, if			■ 1. There is no pres	sumption of abuse	
United S	States Bankruptcy Court for the: Eastern District of	Tennessee	applies will be	to determine if a presump made under <i>Chapter 7 M</i>	•
Case number(if known)			Calculation (Official Form 122A-2).  3. The Means Test does not apply now because of qualified military service but it could apply later.		
			☐ Check if this is a		ny later.
Offici	al Form 122A - 1		LI CHECK II this is a	an amended ming	
	oter 7 Statement of Your Cur	ront Monthly In	omo.		12/19
attach a s case num	epplete and accurate as possible. If two married people a eparate sheet to this form. Include the line number to we ber (if known). If you believe that you are exempted fro military service, complete and file Statement of Exemp Calculate Your Current Monthly Income	which the additional information m a presumption of abuse beca	applies. On the top of a use you do not have pr	any additional pages, write imarily consumer debts or	your name and because of
1. <b>W</b> h	at is your marital and filing status? Check one or	nly.			
	Not married. Fill out Column A, lines 2-11.				
	Married and your spouse is filing with you. Fill ou	ut both Columns A and B, lines	s 2-11.		
	Married and your spouse is NOT filing with you.	You and your spouse are:			
I	$\square$ Living in the same household and are not lega	ally separated. Fill out both Co	olumns A and B, lines	2-11.	
ſ	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading.	egally separated under nonba	nkruptcy law that appl	lies or that you and your s	
101(10 the 6 r	the average monthly income that you received from all NA). For example, if you are filing on September 15, the 6-m nonths, add the income for all 6 months and divide the total as own the same rental property, put the income from that p	nonth period would be March 1 thro by 6. Fill in the result. Do not inclu	ough August 31. If the amude any income amount r	nount of your monthly income more than once. For example	e varied during e, if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	ur gross wages, salary, tips, bonuses, overtime, vroll deductions).	and commissions (before all	\$0.00	\$	
	mony and maintenance payments. Do not include lumn B is filled in.	payments from a spouse if	\$ 0.00	\$	
<b>of</b> y from and	amounts from any source which are regularly payou or your dependents, including child support in an unmarried partner, members of your household roommates. Include regular contributions from a spid in. Do not include payments you listed on line 3.	Include regular contributions d, your dependents, parents,	\$0.00	\$	
5. <b>Ne</b>	income from operating a business, profession,				
		Debtor 1			
	oss receipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00			
	dinary and necessary operating expenses		> \$ 0.00	\$	
	t monthly income from a business, profession, or far	m \$ copy nere ->	Ψ	Ψ	
6. <b>Ne</b>	t income from rental and other real property	Debtor 1			
Gro	oss receipts (before all deductions)	\$ 0.00			
	linary and necessary operating expenses	-\$ 0.00			
	monthly income from rental or other real property	\$ 0.00 Copy here ->	> \$ 0.00	\$	
	erest dividends and royalties	·	\$ 0.00	\$	

7. Interest, dividends, and royalties

Case 3:24-bk-30407-SHB Doc 3 Filed 03/14/24 Entered 03/14/24 14:43:51 Page 2 of 4 Main Document **Justis Ellen Johnson** Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 0.00 \$ \$ 0.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 0.00 Multiply by 12 (the number of months in a year) **x** 12 0.00 12b. The result is your annual income for this part of the form 12b.

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

TN

Fill in the number of people in your household.

4

Fill in the median family income for your state and size of household.

ehold.

13. **\$ 95,748.00** 

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

#### 14. How do the lines compare?

Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*. Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*.

Go to Part 3 and fill out Form 122A–2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

#### X /s/ Justis Ellen Johnson

Justis Ellen Johnson

Signature of Debtor 1

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Debtor 1	Justis Ellen Johnson	Case number (if known)	
Da	March 14, 2024		
	MM / DD / YYYY  If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this for	rm.	

Debtor 1 Justis Ellen Johnson Case number (if known)

### **Current Monthly Income Details for the Debtor**

**Debtor Income Details:** 

Income for the Period 09/01/2023 to 02/29/2024.